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Bib Data Sheet

CONFIRMATION NO. 8227

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|--|---|-------------------------------|---|---------------------------------------|--------------------------------|
| SERIAL NUMBER 10/091,750 | FILING DATE 03/05/2002 RULE | CLASS 345 | GROUP ART UNIT 2674 | ATTORNEY DOCKET NO. IMM047B | |
| APPLICANTS Louis B. Rosenberg, San Jose, CA; | | | | | |
| ** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 09/563,783 05/02/2000 PAT 6,353,427 WHICH IS A CON OF 09/103,281 06/23/1998 PAT 6,088,019 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/29/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Ronald Riegler</i> Examiner's Signature Initials | | STATE OR COUNTRY CA | SHEETS DRAWING 5 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
| ADDRESS James R. Riegel IMMERSION CORPORATION 801 Fox Lane San Jose ,CA 95131 | | | | | |
| TITLE Haptic feedback stylus and othef devices | | | | | |
| FILING FEE RECEIVED 740 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |